

STATEMENT OF ECONOMIC INTERESTS

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PRACTICES COMMISSION
COVER PAGE

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Please type or print in ink.

NAME (LAST) (FIRST) (MIDDLE)
 Roberts John B
 MAILING ADDRESS STREET CITY STATE ZIP CODE

1. Office, Agency, or Court

Name of Office, Agency, or Court:

City Council

Division, Board, District, if applicable:

Your Position:

Council Member

► If filing for multiple positions, list additional agency(ies)/
 position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

☐ State☐ County of _____☒ City of Pontana☐ Multi-County _____☐ Other _____

3. Type of Statement (Check at least one box)

☒ Assuming Office/Initial Date: 12 / 08 / 10☐ Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

☐ The period covered is ____/____/____, through December 31, 2009.☐ Leaving Office Date Left: ____/____/____ (Check one)☐ The period covered is January 1, 2009, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.☐ Candidate Election Year: _____

4. Schedule Summary

► Total number of pages including this cover page: 1

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☐ Yes – schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes – schedule attached
Investments (10% or Greater Ownership)

Schedule B ☐ Yes – schedule attached
Real Property

Schedule C ☐ Yes – schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D ☐ Yes – schedule attached
Income – Gifts

Schedule E ☐ Yes – schedule attached
Income – Gifts – Travel Payments

-or-

☒ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 12/9/2010

Signature

(d)(5)

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TP Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
Roberts	John	B	(d)(5)
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE ZIP CODE
(d)(5)			OPTIONAL: E-MAIL ADDRESS

1. Office, Agency, or Court

Name of Office, Agency, or Court:

City of Fontana

Division, Board, District, if applicable:

Your Position:

City Council Member

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency:

Position:

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ County of _____

☒ City of Fontana

☐ Multi-County _____

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Assuming Office/Initial

Date: 12 / 08 / 10
Amendment

☐ Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

☐ The period covered is ____/____/____, through December 31, 2009.

☐ Leaving Office Date Left: ____/____/____
(Check one)

☐ The period covered is January 1, 2009, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate Election Year: _____

4. Schedule Summary

► Total number of pages including this cover page: 2

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☐ Yes – schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes – schedule attached
Investments (10% or Greater Ownership)

Schedule B ☐ Yes – schedule attached
Real Property

Schedule C ☐ Yes – schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D ☒ Yes – schedule attached
Income – Gifts

Schedule E ☐ Yes – schedule attached
Income – Gifts – Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed December 15, 2010

Signature

(d)(5)

(I have originally signed statement with my own official.)

SCHEDULE D

Income – Gifts

<div> <div>NAME OF SOURCE</div> <div>Best, Best & Krieger</div> <div>ADDRESS (Business Address Acceptable)</div> <div>3500 Porsche Way, Suite 200 Ontario, CA 91764</div> <div>BUSINESS ACTIVITY, IF ANY, OF SOURCE</div> <div>League Conference in September in San Diego, CA</div> <div> <div>DATE (mm/dd/yy)</div> <div>VALUE</div> <div>DESCRIPTION OF GIFT(S)</div> </div> <div> <div>09 / 15 / 10</div> <div>\$ 123.34</div> <div>Reception and Dinner</div> </div> <div> <div>/ /</div> <div>\$</div> <div></div> </div> <div> <div>/ /</div> <div>\$</div> <div></div> </div> </div>	<div> <div>NAME OF SOURCE</div> <div></div> <div>ADDRESS (Business Address Acceptable)</div> <div></div> <div>BUSINESS ACTIVITY, IF ANY, OF SOURCE</div> <div></div> <div> <div>DATE (mm/dd/yy)</div> <div>VALUE</div> <div>DESCRIPTION OF GIFT(S)</div> </div> <div> <div>/ /</div> <div>\$</div> <div></div> </div> <div> <div>/ /</div> <div>\$</div> <div></div> </div> <div> <div>/ /</div> <div>\$</div> <div></div> </div> </div>
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Comments: